

Request for: <input type="checkbox"/> Access to General Records <input type="checkbox"/> Access to Own Personal Information <input type="checkbox"/> Access to Access and Correction	<b>Please Note:</b> All applications must be accompanied by payment of \$5.00 (payable in cash, cheque, debit or money order)  Additional fees apply for photocopying and administrative research time (listed at bottom of page)
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Address: <hr/> <p style="text-align: center;">#, Street Name</p> <hr/> <p style="text-align: center;">Fire #, RR#</p> <hr/> <p style="text-align: center;">City, Prov., Postal Code</p>	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss  Last Name: _____ First Name: _____ Middle Name: _____
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Telephone Number:	Email (preferred over Canada Post? <input 447="" 47="" 573"="" 943="" data-label="Form" type="checkbox/&gt;):&lt;/td&gt; &lt;/tr&gt; &lt;/table&gt; &lt;/div&gt; &lt;div data-bbox="/> <p>Please provide a detailed description of the records requested. Please include all information such as year, month, full name, subject etc...</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> <tr><td style="height: 20px;"> </td></tr> </table>					

Preferred method of access to records: <input type="checkbox"/> Examine Original <input type="checkbox"/> Receive Copy ( <input type="checkbox"/> Digital or <input type="checkbox"/> Physical)	
Signature	Date (dd/mm/year)

<b>For Institution Use Only</b>		
Date Received:	Request Number:	Comments:

Personal information contained on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act, *M.56, R.S.O. 1990*, and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Township Clerk, 8348 Wellington Road 124, P.O. Box 700, Rockwood, ON N0B 2K0, (519) 856-9596.

<b>Additional Fees:</b>			
<b>O.Reg 823 Access to Records and Twp. of Guelph/ Eramosa By-law 59/2002</b>			
* Photocopying or computer printouts	\$0.20 per page	*CDs	\$10.00 each
* Searching for records	\$7.50 per 15 minutes	*Developing computer program	\$15.00 per 15 minutes
<b>O.Reg 823 Access to Your Own Records and Twp. of Guelph/ Eramosa By-law 59/2002</b>			
* Photocopying or computer printouts	\$0.20 per page	*CDs	\$10.00 each
*Developing computer program	\$15.00 per 15 minutes		

*Alternate formats of this form are available upon request*